VFW 11/07/2012 2 11 PM Form 990
Department of the Treasury

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

2011 Open to Public

	al Revenu	7			ganization may ha		py of this return			tıng requ	ureme	nts	Inspec	ction
A	For the	201 ₹ c	alendar yea	ar, or tax yea	r beginning 0	7/01/11	, and ending	06/3	0/12					
	heck if app		C Name of or				<u>-</u>				D	Employer ic	lentification nu	mber
	ddress cha				I.P. "Sarge	"Bell Me	mmorial Po	ost 33	77					
\exists	lame chan		Doing Busin	ness As	VFW Post 3						1	74-22	250050	
\equiv		Ĭ	Number and	d street (or P O	oox if mail is not delivere	d to street address	;)		Room/s	suite		Telephone r		
<u></u> "	nitial return	١	10616	Mancha	ca Rd							512-2	282-230	01
т	erminated	l		n, state or country	.									
	vmended re	eturn	Austi	.n		TX 787	48				G Gr	oss receipts \$	8:	25,552
		ľ		address of princip	al officer						0 0,	odo recerpio e		
^	Application	pending							H(a)) is this a	group ref	turn for affiliat	es? Ye	s X No
		i							н(ь)) Are all a	affiliates	included?	Ye	s No
13									' '				instructions)	
2				(c)(3) X 5	01(c) (19) 4	insert no)	4047/->/4>	507				•	·	
	Vebsite		/A	(c)(3) X 5	01(c) (1 3) 1	insert no)	4947(a)(1) or	527	─ ,					
1, 3				🗆 🖚		7 01 -					exemptio	n number P		
******	Form of org			ration Trus	t Association	Other >		<u> </u>	L Year of for	rmation		M	State of legal dor	nicile
	art I	•	ımmary		·									
-	1 Bi -	•		•	mission or most s	significant activ	vities							
HO.	3	See	Schedul	.e O										
- 독립	4													
100	Ę													
Activities & Govern	2 C	heck thi	ıs box ▶	ıf the organ	ization discontinue	ed its operation	ns or disposed o	f more tha	in 25% of it	ts net as	sets			
, O.	ž 3 N₁	umber d	of voting me	mbers of the	governing body (I	Part VI, line 1a	1)						95	
Se	- 4 N	umber d	of independe	ent voting me	embers of the gove	erning body (P	art VI, line 1b)					4 3	95	
ij	5 To	otal num	nber of indiv	ıduals emplo	yed in calendar ye	ear 2011 (Part	V, line 2a)					5 2	0	
듛	6 To	otal num	nber of volu	nteers (estim	ate if necessary)						Γ	6 0		
•				•	from Part VIII, col	umn (C), line	12					7a	33	4,459
1					come from Form 9	• •						7b		1,848
						·, ····				Prior Y			Current Yo	
ا م	8 C	ontribut	ions and gra	ants (Part VII	I, line 1h)					6	55,9	37	3	<u>7,835</u>
PA E	9 P	rogram	service reve	enue (Part VI	II, line 2g)					54	2,6	80	78	1,867
SCANNED NOV	10 In	vestme	nt income (l	Part VIII, colu	ımn (A), lines 3, 4	, and 7d)					5	39		0
≥ ∞	11 0	ther rev	enue (Part	VIII, column	(A), lines 5, 6d, 8d	, 9c, 10c, and	11e)				5,9	38		5,850
3	12 To	otal reve	enue – add	lines 8 through	h 11 (must equal	Part VIII, colu	mn (A), line 12)			61	.5,0	22	82	5,552
m	13 G	rants ar	nd sımılar ar	mounts paid	(Part IX, column (/	A), lines 1–3)						0		0
ם				•	` Part IX, column (A							0		0
₹,,					ployee benefits (F		(A), lines 5–10)	\		10	4,5	21	11	1,049
			· ·		rt IX, column (A), i		. (, , , , , , , , , , , , , , , , , , ,					0		0
				-	X, column (D), line			0			-			<u>_</u>
2. % Exper					(A), lines 11a-110					50	0,9	89	68	4,509
~	17 O	otal ava	onco Add	lines 12 17	(must equal Part I		7				5,5			5,558
Net Assets or Fund Balances	10 I				line 18 from line	1	-11110-2237	သွ	-		9,5			9,994
- S	19 K	evenue	less expens	ses Subtract		∯ NOV :		Ÿ	Begin	ning of Ci			End of Ye	
ance of	20 T	otal ass	ets (Part X,	line 16)		<u> </u>		₩ ₩			32,5			3,448
Asse Bali	24 T		ilities (Part		·	-		K			2,0			3,002
n det	22 N		•		tract line 21 from	္ကႏ္ဂ္ကGDI	EN, UT			53	30,4			0,446
<u></u>	art II		gnature E		tract line 21 front	ILLE_ZU					, , , ,			0,110
										I				<u> </u>
Un	ider pena	alties of p	perjury, i deci Tranlete Dec	lare that I have laration of prei	e examined this retur parer (other than offi	n, including acci rer) is hased on	ompanying scriedu , all information of v	ules and sta which prepa	itements, an arer has anv	knowled	best of	my knowie	eage and belle	π, it is
	1	St. and N	DIADICIC DOC	D L	2 1 1 2							11	P-200	
٠.	i			70· E								Date Date	1000	<u>/</u>
Sig		, ,	ignature of office	_				•				Date		
Her	e	-		B. Bu	rkett			Qua	rterm	<u>aste</u>	r			
			ype or print nar										5 1	
		Print/Type	e preparer's nar	me		Preparer's signat	ura \	+-	·	Date		Check X	If PTIN	
Paic	Ľ	Cesar	A Jimene			Cesar A Jı			<u>-</u>	11/0	7/12	self-employe	p00363	696
•	parer	Firm's nai	me 🕨		ssociates		tin		, ,		Firm's E	in 🕨		
Use	Only			5912	Salcon Cl									
		Firm's add		Austi		749					Phone r	₁₀ 5	12-326	
May	the IRS	discus	s this return	with the pre	parer shown abov	e? (see instru	ctions)						X Yes	
	Paperv	vork Re	duction Ac	t Notice, se	the separate ins	structions.							Form	990 (2011)
DAA														

		emmorial Post 3377 74-	2250050	Page
	tatement of Program Servion heck if Schedule O contains i	ce Accomplishments a response to any question in this Pa	urt III	X
1 Briefly descr	ribe the organization's mission	a response to any question in the re		1(
See Sche	edule O			
2 Did the orga	nization undertake any significant ni	rogram services during the year which were n	ot listed on the	
-	90 or 990-EZ?	ogram convices daming the year which were h		X Yes No
•	cribe these new services on Schedu			
3 Did the orga services?	nization cease conducting, or make	significant changes in how it conducts, any p	rogram	X Yes No
	cribe these changes on Schedule O	1		
		complishments for each of its three largest pro		
		nizations and section 4947(a)(1) trusts are rec ses, and revenue, if any, for each program se		
4a (Code) (Expenses \$	including grants of \$) (Revenue \$	
				
4b (Code) (Expenses \$	including grants of \$) (Revenue \$	
4c (Code) (Expenses \$	including grants of \$) (Revenue \$	
	am services (Describe in Schedule		(D	
(Expenses	\$ 795,558 include am service expenses ▶	ding grants of \$) 795,558	(Revenue \$)
AA	ш эст. нео спропосо в			Form 990 (2011

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1		<u>X</u>
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	_		37
	candidates for public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	_		х
_	Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If	_		x
_	"Yes," complete Schedule D, Part I	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		х
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II			
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	8		х
	complete Schedule D, Part III	•		
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D. Part IV	9		х
40	Did the organization, directly or through a related organization, hold assets in temporarily restricted	3		-
10	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	- 10		
11				
_	VII, VIII, IX, or X as applicable Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
а	complete Schedule D, Part VI	11a	х	
h	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	110		
b	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
С	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
d	The state of the s			
u	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	The state of the s	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
_	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
20a		20a		X
_b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	L	<u> </u>
		_	997	3

Checklist of Required Schedules (continued)

 Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b 	21		x x x
 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than 	22 23 24a 24b 24c		x
on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	23 24a 24b 24c		х
 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than 	23 24a 24b 24c		х
organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	24a 24b 24c		
employees? If "Yes," complete Schedule J 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	24a 24b 24c		
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	24a 24b 24c		_
· · · · · · · · · · · · · · · · · · ·	24b 24c		x
\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b	24b 24c		_x_
	24b 24c		<u> </u>
through 24d and complete Schedule K. If "No," go to line 25	24c		1
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?			
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
to defease any tax-exempt bonds?	24d		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?			
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	1		
with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
If "Yes," complete Schedule L, Part I	25b		<u> </u>
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee	e, or		1
disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Pa	art II 26		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			ł
entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L,			İ
Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	<u> </u>	X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
Schedule L, Part IV	28b		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
conservation contributions? If "Yes," complete Schedule M	30	ļ	X
Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
Part I	31		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
complete Schedule N, Part II	32		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	l l		
sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
IV, and V, line 1	34	 	X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b Did the organization receive any payment from or engage in any transaction with a controlled entity within the			
meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
related organization? If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
Part VI	_ 37		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
19? Note. All Form 990 filers are required to complete Schedule O	38	X rm 990	Щ_

DAA

Fa	Check if Schoolule O contains a recognition to any question in this Bart V					
	Check if Schedule O contains a response to any question in this Part V		· · · · · · · · · · · · · · · · · · ·			
4	Fater the average reported in Rey 2 of Form 1000. Fater 0 of pat participable	1.4-	ا م		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	0			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b		-		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and				v	İ
	reportable gaming (gambling) winnings to prize winners?			1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax					
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	20			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax re			2b	<u>X</u>	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction	ons)				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a	<u>X</u>	<u> </u>
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b	X	├──
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other					
	over, a financial account in a foreign country (such as a bank account, securities account, or other	financial				
	account)?			4a		X
b	If "Yes," enter the name of the foreign country					
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Finance		ints			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year'			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans	saction?		5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did	the				
_	organization solicit any contributions that were not tax deductible?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	utions or		_		
_	gifts were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	or goods				ĺ
	and services provided to the payor?			7a		\vdash
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it	was		70		
	required to file Form 8282?	7d	İ	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year		l	─ 7e		İ
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit		('	7f		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit co		00 ac required?	7g		
g	If the organization received a contribution of qualified intellectual property, did the organization file. If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization.		•	7 <u>9</u> 7h		
h 8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting		le a i Oiii 1030-C	'''		
0	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsori	_				
	organization, have excess business holdings at any time during the year?	ng .		8		ĺ
9	Sponsoring organizations maintaining donor advised funds.					
a	Did the organization make any taxable distributions under section 4966?			9a		İ
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		-		
11	Section 501(c)(12) organizations. Enter			7		
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources			7		
_	against amounts due or received from them)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Fo		?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note. See the instructions for additional information the organization must report on Schedule O					
b	Enter the amount of reserves the organization is required to maintain by the states in which					
	the organization is licensed to issue qualified health plans	13b				
С	Enter the amount of reserves on hand	13c				<u> </u>
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Sched	dule O		14b		<u> </u>
DAA				For	m 990	(2011)

DAA

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule X O See instructions Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 395 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O 395 1b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X 2 any other officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct X supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 X 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? X 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a X one or more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, X stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8 X 8a The governing body? X Each committee with authority to act on behalf of the governing body? 8b is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes No X 10a Did the organization have local chapters, branches, or affiliates? 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? X Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 X Did the organization have a written conflict of interest policy? If "No," go to line 13 12a 12a 12b X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c describe in Schedule O how this was done 13 Did the organization have a written whistleblower policy? 13 Did the organization have a written document retention and destruction policy? 14 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X The organization's CEO. Executive Director, or top management official 15a X 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement X with a taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, 19 and financial statements available to the public during the tax year State the name, physical address, and telephone number of the person who possesses the books and records of the 20 P.O.Box 808 organization ▶ Terry B. Burkett 512-282-5664 TX 78652 Austin

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the orga (A)	(B)	y reia	ilea	orga (C		lions	COII	(D)	(E)	(F)
Name and Title	Average			Pos	ition			Reportable	Reportable compensation from	Estimated
	hours per week					than o s both		compensation from	related	amount of other
	(describe hours for	offi	cer ar			r/truste		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	or Indiv	Instit	Officer	Key	High	Former	(W-2/1099-MISC)	(** 271000 111100)	organization
	organizations in Schedule	Individual trustee or director	Institutional trustee	ᄜ	Key employee	est c	er			and related organizations
	0)	Trust	al tru		оуее	ompe				
		e	stee			Highest compensated employee				
						ed				
(1) Terry B. Burkett									_	
Quartermaster	40.00	Ш		X				10,800	0	0
(2) Bernabe T. Sabar										_
Commander	10.00	1		Х				0	0	0
(3) Julie Moss										
Jr Vice Comm	1.00			X		ļ		0	0	0
(4) Richard Ramirez	4 00									•
Sr Vice Comm	1.00	ļ		Х	_	├—		0	0	0
(5) Julious O. Duncar										•
Post Chaplain	1.00			X		 		0	0	0
(6) Chales Gaide	1 00							o		0
Post Judge Advocate	1.00			X	<u> </u>			U	0	<u></u>
(7) Russell Moore	1 00			.				o	0	0
Post Surgeon	1.00	-		X				<u> </u>	<u> </u>	
(8)										
(9)										
(10)										
(11)						-				
(12)										
(13)				_						
(14)										

	(A) Name and title	(B) (C) Average Position hours per (do not check more than or box, unless person is both officer and a director/truste hours for Q J J O R Q I							(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	Esti amo o comp fro		
		related organizations in Schedule O)	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)		and	nization related nizations	
(15)													
(16)													
(17)													
(18)													
(19)													
(20)													
(21)								_			· · · · · · · · · · · · · · · · · · ·		
(22)													
(23)													
(24)													
(25)													
	Sub-total							<u> </u>	10,800				
С	Total from continuation sheet Total (add lines 1b and 1c)	ets to Part VII, §	Secti	on A				>	10,800				
2	Total number of individuals (in reportable compensation from	_			thos	e lıs	ted a	bov	·	\$100,000 in			
3	Did the organization list any fo				trust	ee l	ev e	mnl	ovee or highest compensa	ted		Yes	No
	employee on line 1a? If "Yes," For any individual listed on line organization and related organ	complete Schede 1a, is the sum	dule of re	J for	suci able	n inc	lividu pens	al atio	n and other compensation	from the	3		X
5	individual Did any person listed on line 1									ındıvıdual	4	-	X
Sec	for services rendered to the or tion B. Independent Contract		es,	com	piete	. Sc	neau	e J	tor such person		5		<u> </u>
1	Complete this table for your fix compensation from the organi	zation Report co	ensa ompe	ted i	ndep tion 1	end for t	ent o	onti	dar year ending with or with	in the organization's tax ye	ar		
	Name and	(A) business address					_		Descript	(B) tion of services		(C) Compensa	ation
											:		
												_	
													
2	Total number of independent of	contractors (inclued)	_						se listed above) who	0			

Form 990 (2011) I.P. "Sarge"Bell Memmorial Post 3377 74-2250050

Pa	rt VI	II Staten	nent of Reve	nue		·····				
		,					(A) Total revenue	(B) Related or exempt function	(C) Unrelated business	(D) Revenue excluded from tax under sections
		•						revenue	revenue	512, 513, or 514
ts s	1a	Federated can	npaigns	1a						
ققا		Membership d	-	1b		3,188				
Ĕ,		Fundraising ev		1c		8,205				
ar it		Related organi		1d						
SE SE		Government grants (1e						
Sign		All other contribution								
돌	•	and similar amounts		1f		26,442				
ξÖ	g	Noncash contribution	ns included in lines 1a		 }	·				
Contributions, Gifts, Grants and Other Similar Amounts	_	Total. Add line		., ,		▶	37,835			
9						Busn Code				
Ē	2a	Canteen	nonmember			722410	272,844		272,844	
æ	b	Bingo Ii					253,223			253,223
<u>i</u>	С	Canteen					182,186			182,186
Ser	d	Pull Tal	os			900099	61,615		61,615	
Program Service Revenue	е	Hall Ren	ntal				11,999			11,999
g	f	All other progra	am service reve	enue						
<u>r</u>	g	Total. Add line	es <u>2a-2f</u>				781,867			
	3	Investment inc	ome (including	dıvıden	ds, intere	st,				
		and other simi	lar amounts)			▶ L				
	4	Income from in	nvestment of tax	x-exem	pt bond p	roceeds 🕨 [
	5	Royalties				•				
			(ı) Real		(n) P	ersonal				
	6a	Gross rents								
	b	Less rental exps								
	С	Rental inc or (loss)								
	_d	Net rental inco	me or (loss)			•				
	7a	72 Creen amount from				Other				
		other than inventory								
	b	Less cost or other								
		basis & sales exps								
	С	Gain or (loss)								
	d	Net gain or (lo	ss)			•				·
ne	8a	Gross income fro	om fundraising eve	ents						
ű		(not including \$								
ě		of contributions i	reported on line 1c	;)						
Other Reven		See Part IV, line	18	а						
)the		Less direct ex		b						
0			(loss) from fund	1	events	•				 –
	9a		om gaming activition	es						
		See Part IV, line	19	а						
		Less direct ex		b						
			(loss) from gan		tivities	•				
	10a		f inventory, less	i						
		returns and all		а						
		Less cost of g		b	-				1	
	С		(loss) from sale		ventory	<u> </u>		,	<u> </u>	
			cellaneous Revenue			Busn Code				1 804
	11a						1,794			1,794
	b	district	meating			 	896			896
	C	atm					601			601
	d	All other rever					2,559 5,850			2,559
	e	Total. Add line					825,552	0	334,459	453,258
	12	i otai revenue	e. See instruct <u>io</u>)riS			625,552	<u> </u>	334,439	=33,236

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

	Check if Schedule O contains a respons	e to any question in this Pa	nrt IX		
Do	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b,	8b, 9b, and 10b of Part VIII.		expenses	general expenses \	expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21			······································	
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16			·····	
4	Benefits paid to or for members				<u></u>
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	100 001	100 001		
7	Other salaries and wages	108,321	108,321		
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	0.700	0.700		
10	Payroll taxes	2,728	2,728		
11	Fees for services (non-employees)				
a	Management	294	294		
b	Legal	294	294		
С.	Accounting				
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	17,694	17,694		
9	Other	17,094	11,094		
12	Advertising and promotion				
13	Office expenses				· · · · - · · · · · · · · · · · · · · ·
14	Information technology				
15	Royalties				
16 17	Occupancy Travel				
18	Payments of travel or entertainment expenses	-			
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	4,053	4,053		<u></u>
23	Insurance	-1-30			
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)				
а	Card Prices	200,378	200,378		
b	sweepstakes expenses	87,676			
c	VFW programatic expenses	67,573	67,573		
d	VFW operational expenses	64,993			
е	-	241,848			
25	Total functional expenses. Add lines 1 through 24e	795,558	795,558	0	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				

	irt X	Balance Sheet					
					(A)		(B)
		•			Beginning of year		End of year
	1	Cash—non-interest bearing			222,333	1	250,323
	2	Savings and temporary cash investments				2	7,000
	3	Pledges and grants receivable, net		,		3	
	4	Accounts receivable, net		,		4	······································
	5	Receivables from current and former officers, directors,	trustees, key				
		employees, and highest compensated employees Com	plete Part II of				
		Schedule L		ļ		_5	
	6	Receivables from other disqualified persons (as defined	under section				
		4958(f)(1)), persons described in section $4958(c)(3)(B)$,	and contributing				
		employers and sponsoring organizations of section 501(c)(9) voluntary				
ţ		employees' beneficiary organizations (see instructions)				6	
Assets	7	Notes and loans receivable, net				7	
⋖	8	Inventories for sale or use			1,788	8	1,788
	9	Prepaid expenses and deferred charges		ļ		9	
	10a	Land, buildings, and equipment cost or	·				
		other basis Complete Part VI of Schedule D		08,755			
	þ	Less accumulated depreciation	10b 10	04,418	308,390	10c	304,337
	11	Investments—publicly traded securities				11	
	12	Investments—other securities See Part IV, line 11				12	
	13	Investments—program-related See Part IV, line 11		ļ		13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must equal line 34	4)		532,511	16	563,448
	17	Accounts payable and accrued expenses			2,059	17	-35
	18	Grants payable		-		18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability Complete Part IV of				21	
es	22	Payables to current and former officers, directors, truste					
ij		employees, highest compensated employees, and disqu	ualified persons				
Liabilities		Complete Part II of Schedule L				22	
_	23	Secured mortgages and notes payable to unrelated third				23	
	24	Unsecured notes and loans payable to unrelated third pa		-		24	
	25	Other liabilities (including federal income tax, payables t					
		parties, and other liabilities not included on lines 17-24)	Complete Part X			25	3,037
		of Schedule D			2,059	26	3,002
	26	Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here ► X	and complete		2,000	20	3,002
Ś		lines 27 through 29, and lines 33 and 34.	and complete				
nce	27	Unrestricted net assets			530,452	27	560,446
ala	27				330/132	28	000,110
B B	28 29	Temporarily restricted net assets Permanently restricted net assets				29	
5	29	Organizations that do not follow SFAS 117, check he	ere ▶ and				
Net Assets or Fund Balances		complete lines 30 through 34.	o.o P and				
its (30	Capital stock or trust principal, or current funds				30	
SSE	31	Paid-in or capital surplus, or land, building, or equipmen	t fund	ŀ		31	
ίΑ	32	Retained earnings, endowment, accumulated income, or		ŀ		32	
ž	33	Total net assets or fund balances	. Janor runuo	ŀ	530,452	33	560,446
	34	Total liabilities and net assets/fund balances		ľ	532,511	34	563,448

Form **990** (2011)

Form	990 (2011) I.P. "Sarge"Bell Memmorial Post 3377 74-2250050			Pag	ge 12
	rt XI Reconciliation of Net Assets				_
	Check if Schedule O contains a response to any question in this Part XI				
	·				
1	Total revenue (must equal Part VIII, column (A), line 12)	1			<u>552</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2			<u>558</u>
3	Revenue less expenses Subtract line 2 from line 1	3			994
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	53	30,	<u>452</u>
5	Other changes in net assets or fund balances (explain in Schedule O)	5			
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33,				
	column (B))	6	<u>56</u>	60,	<u>446</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other		_		ĺ
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
b	Were the organization's financial statements audited by an independent accountant?		2b		X
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O				
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were				
	issued on a separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		<u> </u>
			Forr	ա 99 ((2011)

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2011

Open to Public

Inspection

Employer identification number Name of the organization 74-2250050 I.P. "Sarge"Bell Memmorial Post 3377 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6 (b) Funds and other accounts (a) Donor advised funds 1 Total number at end of year 2 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year 2a a Total number of conservation easements 2b b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Yes violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) Yes (i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenues included in Form 990, Part VIII, line 1 S Assets included in Form 990, Part X

Sche	edule D (Form 990) 2011 I.P. "Sar	<u>ge"Bell Mer</u>	mmorial Pos	t 3377	74-2250050	Page 2
Pa	rt III Organizations Maintainin	g Collections of	Art, Historical T	reasures,	or Other Similar A	ssets (continued)
3	Using the organization's acquisition, access collection items (check all that apply)	sion, and other record	ls, check any of the fo	llowing that ar	re a significant use of its	
а	Public exhibition	d 🗍	Loan or exchange pro	grams		
b	Scholarly research	e 🗍	Other			
С	Preservation for future generations					
4	Provide a description of the organization's of	collections and explain	n how they further the	organization's	s exempt purpose in Pai	rt
	XIV	•	,	3	, , , , , , , , , , , , , , , , , , , ,	
5	During the year, did the organization solicit	or receive donations	of art, historical treasu	res. or other :	sımılar	
•	assets to be sold to raise funds rather than					Yes No
Pa	ert IV Escrow and Custodial Ar					
	line 9, or reported an amou					
1a	Is the organization an agent, trustee, custoo			or other asset	s not	
	included on Form 990, Part X?	and of other interince	nary for contributions (or other about	o not	Yes No
h	If "Yes," explain the arrangement in Part XIV	/ and complete the fo	Nowing table			
	Too, explain the arrangement in Fart X	and complete the te	moving table			Amount
_	Pogunning holonos				1c	
	Beginning balance					
	Additions during the year				_ <u>1d</u>	
e	Distributions during the year				1e	
f	Ending balance				1f	
	Did the organization include an amount on I		217			Yes No
	If "Yes," explain the arrangement in Part XIV				000 D 1071	
Pa	ert V Endowment Funds. Com		zation answered "	Yes" to For	m 990, Part IV, line	; 10
		(a) Current year	(b) Prior year	(c) Two yea	rs back (d) Three year	s back (e) Four years back
1a	Beginning of year balance					
b	Contributions					
С	Net investment earnings, gains, and					
	losses					
d	Grants or scholarships					
е	Other expenditures for facilities and					
	programs					
f	Administrative expenses					
g	End of year balance					
2	Provide the estimated percentage of the cu	rrent year end balanc	e (line 1g, column (a))	held as		
а	Board designated or quasi-endowment	%				
b	Permanent endowment ▶ %					
С	Temporarily restricted endowment ▶	%				
	The percentages in lines 2a, 2b, and 2c sho	ould equal 100%				
3a	Are there endowment funds not in the possi	•	ation that are held and	administered	I for the	
	organization by	Ū				Yes No
	(i) unrelated organizations					3a(i)
	(ii) related organizations					3a(iı)
h	If "Yes" to 3a(ii), are the related organization	ns listed as required o	on Schedule R2			3b
4	Describe in Part XIV the intended uses of the	•				<u> </u>
	art VI Land, Buildings, and Equ			9 10		
1-0	Description of property	(a) Cost or other			(c) Accumulated	(d) Book value
	bescription of property	(investment)		I	depreciation	(2) 200
	Lond	(52,532	-F	252,532
	Land			JZ , JJZ		232,332
	Buildings					
	Leasehold improvements					
d	Equipment			56 223	104 41	8 51 805
			, ,	111 // 1	1	

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

304,337

	Investments—Other Securities. See Form 99	90, Part X, line 12	
	(a) Description of security or category	(b) Book value	(c) Method of valuation
	(including name of security)		Cost or end-of-year market value
(1) Financial'd			
	ld equity interests		
(3) Other			
(A)			
(B)			
(C)			
(D)		· · · · · · · · · · · · · · · · · · ·	
(E) (F)		<u> </u>	
(F) (G)			
(H)			
(I)			
	n (b) must equal Form 990, Part X, col (B) line 12)	<u> </u>	
Part VIII	Investments—Program Related. See Form 9	90, Part X, line 13	
	(a) Description of investment type	(b) Book value	(c) Method of valuation
			Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)		_	
(6)			
(7)			
(8)			
(9) (10)			
` 	n (b) must equal Form 990, Part X, col (B) line 13)	>	
Part IX	Other Assets. See Form 990, Part X, line 15		
	(a) Description		(b) Book value
(1)			
(2)			
(3)			
(5)			
(5) (6)			
(5) (6) (7)			
(5) (6) (7) (8)			
(5) (6) (7) (8) (9)			
(5) (6) (7) (8) (9) (10)	n (h) must equal Form 990. Part X. col. (B) line 15.)		>
(5) (6) (7) (8) (9) (10) Total. (Colum	n (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. See Form 990, Part X, line 2	25	>
(5) (6) (7) (8) (9) (10) Total. (Colum Part X	n (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. See Form 990, Part X, line 2	25 (b) Book value	>
(5) (6) (7) (8) (9) (10) Total. (Colum Part X 1.	Other Liabilities. See Form 990, Part X, line 2	(b) Book value	>
(5) (6) (7) (8) (9) (10) Total. (Colum Part X 1. (1) Federal	Other Liabilities. See Form 990, Part X, line 2 (a) Description of liability		>
(5) (6) (7) (8) (9) (10) Total. (Column Part X 1. (1) Federal	Other Liabilities. See Form 990, Part X, line 2 (a) Description of liability Income taxes	(b) Book value	>
(5) (6) (7) (8) (9) (10) Total. (Colum Part X 1. (1) Federal (2) Other	Other Liabilities. See Form 990, Part X, line 2 (a) Description of liability Income taxes	(b) Book value	>
(5) (6) (7) (8) (9) (10) Total. (Colum Part X 1. (1) Federal (2) Other (3)	Other Liabilities. See Form 990, Part X, line 2 (a) Description of liability Income taxes	(b) Book value	>
(5) (6) (7) (8) (9) (10) Total. (Column Part X 1. (1) Federal (2) Other (3) (4) (5) (6)	Other Liabilities. See Form 990, Part X, line 2 (a) Description of liability Income taxes	(b) Book value	•
(5) (6) (7) (8) (9) (10) Total. (Column Part X 1. (1) Federal (2) Other (3) (4) (5) (6) (7)	Other Liabilities. See Form 990, Part X, line 2 (a) Description of liability Income taxes	(b) Book value	•
(5) (6) (7) (8) (9) (10) Total. (Colum Part X 1. (1) Federal (2) Other (3) (4) (5) (6) (7) (8)	Other Liabilities. See Form 990, Part X, line 2 (a) Description of liability Income taxes	(b) Book value	>
(5) (6) (7) (8) (9) (10) Total. (Colum Part X 1. (1) Federal (2) Other (3) (4) (5) (6) (7) (8) (9)	Other Liabilities. See Form 990, Part X, line 2 (a) Description of liability Income taxes	(b) Book value	>
(5) (6) (7) (8) (9) (10) Total. (Colum Part X 1. (1) Federal (2) Other (3) (4) (5) (6) (7) (8) (9) (10)	Other Liabilities. See Form 990, Part X, line 2 (a) Description of liability Income taxes	(b) Book value	
(5) (6) (7) (8) (9) (10) Total. (Colum Part X 1. (1) Federal (2) Other (3) (4) (5) (6) (7) (8) (9) (10) (11)	Other Liabilities. See Form 990, Part X, line 2 (a) Description of liability Income taxes Liabilities	(b) Book value	•

che	dule D (Form 990) 2011 I.P. "Sarge"Bell Memmorial Po			Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990	to Audited Financial St	tatements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	
2	Total expenses*(Form 990, Part IX, column (A), line 25)		2	
3	Excess or (deficit) for the year Subtract line 2 from line 1		3	
4	Net unrealized gains (losses) on investments		4	
5	Donated services and use of facilities		5	
6	Investment expenses		6	
7	Prior period adjustments		7	
8	Other (Describe in Part XIV)		8	
9	Total adjustments (net) Add lines 4 through 8		9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and	nd 9	10	
Рa	rt XII Reconciliation of Revenue per Audited Financial Stater	ments With Revenue pe	er Return	
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	_2c		
d	Other (Describe in Part XIV)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV)	4b		
С	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	
Pa	rt XIII Reconciliation of Expenses per Audited Financial State	ements With Expenses	per Return	
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIV)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV)	4b		
	Add lines 4a and 4b		4c	
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	
Рa	rt XIV Supplemental Information			

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Schedule D (Form 990) 2011 I.P. "Sarge"Bell Memmorial Post 3377 74-2250050

Part XIV Supplemental Information (continued)

Page 5

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

2011
Open to Public Inspection

OMB No 1545-0047

Name of the organization

I.P. "Sarge"Bell Memmorial Post 3377

Employer identification number 74-2250050

Form 990 - Organization's Mission or Most Significant Activities

By Congressional Charter the corporation shall be fraternal, patriotic,
historical, charitable and educational; to preserve and strengthen

comradeship among its member to assist worthy comrades; to perpetuate the
memory and history of our dead, and to assist their widows and orphans; to
maintain true allegiance to the government of the United States of America,
and fidelity to its Constitution and laws; to foster true patriotism; to
maintain and extend the institutions of American freedom; and to preserve
and defend the United States from all her enemies.

Form 990, Part III, Line 2

Post engaged services of a company to provide entertainment sweepstakes to the membership and the public.

Form 990, Part III, Line 3

Post engaged services of a company to provide entertainment sweepstakes to the membership and the public.

Due to a reorganization of the financial and managerial procedures the Post is implementing changes in the categories used to record program services and individual line items have been consolidated in order to more properly account and disseminate the financial information.

Form 990, Part III, Line 4d - All Other Accomplishment

By Congressional Charter the corporation shall be fraternal, patriotic,

historical, charitable and educational; to preserve and strengthen

Name of the organization

I.P. "Sarge"Bell Memmorial Post 3377

Employer identification number 74-2250050

comradeship among its member to assist worthy comrades; to perpetuate the memory and history of our dead, and to assist their widows and orphans; to maintain true allegiance to the government of the United States of America, and fidelity to its Constitution and laws; to foster true patriotism; to maintain and extend the institutions of American freedom; and to preserve and defend the United States from all her enemies.

In compliance with the mandate the organization maintains a Activity room a canteen and grounds for the benefit of the members and the community.

It engages in Legal Bingo activities with the funds/ revenues shared per state law with other non-for- profit organization whose purpose is in line with the purpose and goals of the VFW as mandated by its Congressional Charter.

Form 990, Part VI - Material Differences in Voting Rights Explanation no

Form 990, Part VI, Line 1a - Authority Delegated to Committee Explanation Execute audits per the vfw charter.

Form 990, Part VI, Line 2 - Related Party Information Among Officers

Quartermaste

Financ offic

Same person

Form 990, Part VI, Line 3 - Management Delegated

I.P. "Sarge"Bell Memmorial Post 3377

Employer identification number 74–2250050

No

Form 990, Part VI, Line 4 - Significant Changes to Organizational Documents Organizational charter was ammented in 2012 on file copies of new items and old reports

Form 990, Part VI, Line 5 - Material Diversion of Assets

Yes a review of the financial transactions regarding v sweeps yielded results inconsistent with the stated expectations and previous Quarter master was replaced and instituted changes to financial management process to avert any reoccurrence of the same early 2012

Form 990, Part VI, Line 7a - Election of Members and Their Rights
Any veteran can join upon paying yearly dues.

Form 990, Part VI, Line 7b - Decisions Subject to Approval of Members yes all issues are voted upon by whole membership quorum is 7 members who may not vote on behalf a non present-member.

Form 990, Part VI, Line 10b - Policies and Procedures Governing Chapters VFW follows national guidelines for managing its affairs and finances and reports to national headquarters on all financial matters.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

Form 990 is received by Finance officer who reviews signs and mails form

990 officer points out to preparer any area of concern and advices preparer of expenses shared or chargeable to multiple funds.

Name of the organization	Employer identification number
I.P. "Sarge"Bell Memmorial Post 3377	74-2250050

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy All policy follow vfw national guidelines.

Form 990, Part VI, Line 15a - Compensation Process for Top Official Compensation is voted on and reviewed by whole membership at the regular meetings if brought up for discussion.

Form 990, Part VI, Line 15b - Compensation Process for Officers

Any and all compensation is reviewed by governing body and presented to

membership to be voted on and approved by the general membership vote.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Held at post available to public during business hrs. and upon request to the quartermaster.

Form 990, Part IX, Line 24e - Other Expenses

Description	Am	ount
Sweepstakes expenses	\$	58,451
programatic activities	\$	45,029
Instant prices	\$	44,247
VFW operational expenses	\$	43,328
Charitable donations cash	\$	14,196
taxes	\$	10,657
Taxes	\$	7,105
COGS	\$	4,519
Charitable Contributions	\$	3,454

Schedule O (Form 990 or 990-EZ) (2011)

Name of the organization I.P. "Sarge"Bell Mem	morial Post	3377	Employer identification number 74-2250050
utilities	\$	2,440	
Bldg repair	\$	1,936	
Bingo eqpt other	\$	1,557	
bingo license	\$	1,206	
vfw operational expenses	\$	760	
Utilities	\$	594	
Donations	\$	563	
Repairs/Maintenance	\$	471	
Equipment	\$	379	
event games	\$	275	
Advertising	\$	270	
donation	\$	137	
Repairs/Maintenance	\$	100	
Supplies	\$	87	
Advertising	\$	66	
Bingo supplies	\$	21	